UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/790,632	03/01/2004	Randall K. Woods	5053-63200	1334

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EXAMINER
PHONGSVIRAJATI, POONSIN

ART UNIT	PAPER NUMBER
3686	

NOTIFICATION DATE	DELIVERY MODE
10/20/2009	ELECTRONIC

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Notice of the Office communication was sent electronically on above-indicated "Notification Date" to the following e-mail address(es):

patent_docketing@intprop.com
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PTOL-90A (Rev. 04/07)

	Application No.	Applicant(s)
	10/790,632	WOODS ET AL.
Office Action Summary	Examiner	Art Unit	
	SIND PHONGSVIRAJATI	3686	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE *3* MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.
- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1) ☒ Responsive to communication(s) filed on *24 August 2009*.
2a) ☒ This action is **FINAL**.   2b) ☐ This action is non-final.
3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4) ☒ Claim(s) *1,2,4-22,24-42,44-55 and 100-106* is/are pending in the application.
     4a) Of the above claim(s) *none* is/are withdrawn from consideration.
5) ☐ Claim(s) _____ is/are allowed.
6) ☒ Claim(s) *1,2,4-22,24-42,44-55 and 100-106* is/are rejected.
7) ☐ Claim(s) _____ is/are objected to.
8) ☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9) ☐ The specification is objected to by the Examiner.
10) ☐ The drawing(s) filed on _____ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.
     Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).
     Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
     a) ☐ All   b) ☐ Some * c) ☐ None of:
         1. ☐ Certified copies of the priority documents have been received.
         2. ☐ Certified copies of the priority documents have been received in Application No. _____.
         3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).
     * See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

1) ☒ Notice of References Cited (PTO-892)
2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
3) ☒ Information Disclosure Statement(s) (PTO/SB/08) Paper No(s)/Mail Date *20090911, 20090911*.
4) ☐ Interview Summary (PTO-413) Paper No(s)/Mail Date. _____ .
5) ☐ Notice of Informal Patent Application
6) ☐ Other: _____ .

DETAILED ACTION

Status of Claims

1.   In response to communications received on 08/24/2009, claims 1, 21-22, and 24-41 are currently amended, claims 101-106 are new, claims 1-2, 4-22, 24-42, 44-55, and 100-106 are now pending.

Response to Amendment

Statutory Subject Matter - 35 USC § 101

2.   35 U.S.C. 101 reads as follows:

> Whoever invents or discovers any new and useful process, machine, manufacture, or composition of matter, or any new and useful improvement thereof, may obtain a patent therefor, subject to the conditions and requirements of this title.

3.   In response to amendments made to claim 1, claim 1 positively recites "the computer system" performing each and every limitation to claim 1, the method is clearly tied to a machine and therefore the 101 rejection is withdrawn.

4.   Claims 2, 4-20, 100-106 claim dependency on claim 1 and incorporate the same reasoning for being directed towards statutory subject matter under 101.

5.   In response to claim amendments to claims 21-22, 24-40, Applicant has amended these claims to a computer-readable physical storage medium which excludes nonstatutory embodiment such as signals from Applicant's specifications. Claims 21-22, 24-40 are now directed towards statutory subject matter under 101 and therefore the previous 101 rejection is withdrawn.

Claim Rejections - 35 USC § 103

1.   The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all

obviousness rejections set forth in this Office action:

> (a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negatived by the manner in which the invention was made.

2.   The factual inquiries set forth in *Graham* **v.** *John Deere Co.*, 383 U.S. 1, 148

USPQ 459 (1966), that are applied for establishing a background for determining

obviousness under 35 U.S.C. 103(a) are summarized as follows:

> 1.   Determining the scope and contents of the prior art.
> 2.   Ascertaining the differences between the prior art and the claims at issue.
> 3.   Resolving the level of ordinary skill in the pertinent art.
> 4.   Considering objective evidence present in the application indicating obviousness or nonobviousness.

3.   Claims 1-2, 4-22, 24-42, 44-55, 100-106 are rejected under 35 U.S.C. 103(a) as

being unpatentable over Zak et al. (US 2002/0004729 A1) in view of Burge et al.

(US 2003/0200123 A1) in further view of Dormond et al. (US 4,839,822) and

Childress et al. (US 2004/0088198).

4.   As to **Claim 1, 21, and 41 and 100,** Zak teaches a method, a program

instructions executable, and an insurance claim processing system comprising:

providing a graphical display comprising at least one human body representation

comprising a visual image (Zak, Fig. 3-4); receiving a first selection of a first body part

on at least one human body representation (Zak, Fig. 3-4); displaying in response to receiving the first selection of the first body part, a first set of input fields for input selection relating to at least one injury for the first body part (Zak, Fig. 3-4); receiving an input selection relating to at least one injury for the first body part via at least one of the input fields of the displayed first set of input fields (Zak, Fig. 4) and highlighting body parts for which input has been received in a different manner than body parts that have been selected but for which input has not been received (Zak, Fig. 4);

But, Zak does not specifically disclose providing a graphical display in an insurance claim processing system. However, Burge does disclose using a graphical representation of a human body within an insurance claim processing system (Burge, Abstract and paragraph 49).

It would have been obvious to one of ordinary skill in the art at the time of the invention to have included a body representation for injury reports inside an insurance claim processing system in order to submit a clearer and concise claims report for emergency medical services. One would have been motivated to use software that is capable of generating a virtual human for claims processing since it is well known in the art for human and dummy representation, such as the Bodybuilder and Anthropos products by the TecMath corporation and Mannequin Pro from NexGen Ergonomics (Burge, paragraph 49).

The combination of Zak and Burge does not specifically disclose:

after receiving the input selection relating to at least one injury for the first body part, receiving at least one selection of a second body part that is different from the first body part; removing from the display the first set of input fields for input selection relating to the at least one iniury for the first body part; and displaying a second set of input fields for input selection relating to at least one injury for the second body part, wherein the second set of input fields for input selection relating to the at least one injury for the second body part for the second body part is different from the first set of input fields for input selection relating to the at least one injury for the first body part; and receiving an input selection relating to at least one injury for the second body part via at least one of the displayed input fields of the displayed second set of input fields.

Dormond does teach after receiving the input selection relating to at least one injury for the first body part, receiving at least one selection of a second body part that is different from the first body part (Dormond, Fig. 3-4); removing from the display the first set of input fields for input selection relating to the at least one injury for the first body part (Dormond, Fig. 4-5); and displaying a second set of input fields for input selection relating to at least one injury for the second body part, wherein the second set of input fields for input selection relating to the at least one injury for the second body part for the second body part is different from the first set of input fields for input selection relating to the at least one injury for the first body part (Dormond, Fig. 5); and receiving an input selection relating to at least one injury for the second body part via at least one of the displayed input fields of the displayed second set of input fields (Dormond, Fig.

5). It would have been obvious to one of ordinary skill in the art at the time of the invention to have included an input section for at least one injury to a second body part that is different from the first body part for the motivation for using software that is capable of generating a virtual human for claims processing since it is well known in the art for human and dummy representation, such as the Bodybuilder and Anthropos products by the TecMath corporation and Mannequin Pro from NexGen Ergonomics (Burge, paragraph 49).

The combination of Zak, Burge, and Dormond does not specifically disclose the computer system receiving a first insurance code selection, wherein the insurance code specifies a bodily injury to the first body part, wherein the first insurance code is selected by a user. the computer system receiving a second insurance code selection, wherein the insurance code specifies a bodily injury to the second body part, wherein the second insurance code is selected by a user; the computer system accessing a contributing factor value corresponding to at least one of the first insurance code selection and the second insurance code selection, wherein the contributing factor value is a numeric value that is proportional to the level of trauma experienced during and after a bodily injury associated with the corresponding insurance code selection; and the computer system estimating a monetary amount for general damages for a bodily injury insurance claim, wherein the estimated monetary amount for general damages for the bodily injury insurance claim is based at least in part on the contributing factor value, and wherein the estimated monetary amount for general damages comprises an

amount to compensate a claimant for pain and suffering associated with a bodily injury

associated with at least one of the first insurance code selection and the second

insurance code selection. However, all of which is old and well known in an insurance

claims processing system as evidence by Childress. Childress teaches the computer

system receiving a first insurance code selection, wherein the insurance code specifies

a bodily injury to the first body part, wherein the first insurance code is selected by a

user (Fig. 6a, 11, 2C, 3C, paragraphs 239, 247, 256-257); the computer system

receiving a second insurance code selection, wherein the insurance code specifies a

bodily injury to the second body part, wherein the second insurance code is selected by

a user (Fig. 6a, 11, 2C, 3C, paragraphs 239, 247, 256-257); the computer system

accessing a contributing factor value corresponding to at least one of the first insurance

code selection and the second insurance code selection, wherein the contributing factor

value is a numeric value that is proportional to the level of trauma experienced during

and after a bodily injury associated with the corresponding insurance code selection

(paragraphs 257-258, 263, 269-270); and the computer system estimating a monetary

amount for general damages for a bodily injury insurance claim, wherein the estimated

monetary amount for general damages for the bodily injury insurance claim is based at

least in part on the contributing factor value, and wherein the estimated monetary

amount for general damages comprises an amount to compensate a claimant for pain

and suffering associated with a bodily injury associated with at least one of the first

insurance code selection and the second insurance code selection (paragraphs 258,

261-263, 270, and 299). It would have been obvious to one of ordinary skill in the art at the time of the invention to have included ICD insurance codes for processing bodily injury to body parts, associate a contributing factor value proportional to the level of trauma experienced during the bodily injury, and process a monetary estimate for the pain and suffering associated with the bodily injuries for the motivation for process insurance claims as desired by both Burge, Zak, and Childress (Abstracts).

5.   As to **Claim 2, 22, and 42**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, wherein at least one of the sets of input fields comprises a listing of at least one injury for at least one subpart and the input selection comprises selecting an injury from the listing of at least one injury (Zak, Fig. 4 and paragraph 79).

6.   As to **Claim 4, 24, and 44**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, wherein the listing of at least one injury for at least one subpart appears for the subpart when the subpart is selected from the listing of at least one subpart (Zak, Fig. 4 and paragraph 76).

7.   As to **Claim 5, 25, and 45**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, wherein the input selection information for the selected body part comprises a listing of at least one subpart and a listing of at least one injury (Zak, Fig. 4).

8.   As to **Claim 6, 26, and 46**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, wherein the input selection

information for a listing of at least one injury further comprises a listing of at least one treatment (Zak, Fig. 9 and paragraph 87).

9.   As to **Claim 7, 27, and 47**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, wherein a listing of at least one treatment appears when an injury is selected from a listing of at least one injury (Zak, Fig. 9 and paragraph 87).

10.   As to **Claim 8, 28, and 48**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, wherein at least one human body representation comprises a representation of at least one of a human musculature, a human nervous system, a human skeletal system, and a human skin (Zak, Fig. 3).

11.   As to **Claim 9, 29, and 49**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, further comprising displaying a menu near the selected body part (Zak, Fig. 3-4).

12.   As to **Claim 10, 30, and 50**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, further comprising distinguishing the body part selected by at least one of highlighting, outlining, and circling the selected body part (Zak, Fig. 3).

13.   As to **Claim 11, 31, and 51**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, further comprising

distinguishing a body part for which input selection has been received (Zak, Fig. 4 and paragraph 79).

14.   As to **Claim 12, 32, and 52**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, wherein an indicator used for a body part that is currently selected is different from a body part from which an input selection has been received (Zak, Fig. 4 element 206).

15.   As to **Claim 13, 33, and 53**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, further comprising displaying a more detailed view of a body part, in response to the body part being selected in the graphical display (Zak, Fig. 4).

16.   As to **Claim 14, 34, and 54**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, wherein the listing of at least one subpart appears in a popup menu (Zak, Fig. 2-4, whereas the transition of screens from Fig. 2 to Fig. 4 can be interpreted as a popup menu).

17.   As to **Claim 15, 35, and 55**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, further comprising displaying a popup menu of at least one injury type for a subpart when the subpart is selected (Zak, Fig. 2-4).

18.   As to **Claim 16 and 36**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, wherein a subpart in the listing

of at least one subpart is a node, wherein selecting the node displays a listing of at least one injury for the subpart (Zak, Fig. 4 and paragraph 79).

19.   As to **Claim 17 and 37**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, further comprising displaying a listing of received input selections (Zak, Fig. 4 and paragraph 79).

20.   As to **Claim 18 and 38**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, further comprising displaying an indicator next to a listing of a received input selection to indicate whether the input selection should be considered in a respective insurance claim (Zak, Fig. 2 elements 241-243).

21.   As to **Claim 19 and 39**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, further comprising displaying a listing of available human body representations (Zak, Fig. 3 element 210, where the human body representations are the front, right, left, and rear views).

22.   As to **Claim 20 and 40**, Zak teaches the method, the program instructions executable, and the insurance claim processing system, further comprising displaying an indicator relative to a listing of a human body representation to indicate the human body representations that have had input selections entered (Zak, Fig. 3 element 206).

23.   As to **Claims 101-106,** the combination of Zak, Burge, and Dormond does not specifically disclose the method of claim 1, wherein at least one of the first insurance code selection and the second insurance code selection is an injury code, wherein the

contributing factor value for the injury code has a positive value, the method further

comprising: accessing at least one contributing factor value corresponding to a

treatment code for a treatment for the bodily injury, wherein the contributing factor value

corresponding to the treatment code has a negative value, wherein estimating the

monetary amount for general damages for the bodily injury insurance claim comprises

combining the contributing factor value having a positive value corresponding to the

injury code with at least the contributing factor value having a negative value

corresponding to the treatment code, wherein the contributing factor value

corresponding to the injury code results in an increase in the estimated monetary

amount for general damages for the bodily injury insurance claim, wherein the

contributing factor value corresponding to the treatment code results in a decrease in

the estimated monetary amount for general damages for the bodily injury insurance

claim; wherein the estimated monetary amount for general damages is based on the

contributing factor value and at least one regional factor; wherein the estimated

monetary amount for general damages is based on the contributing factor value and

cost of living; sorting the contributing factor value corresponding to the at least one

insurance code selection with contributing factor values for one or more other insurance

codes related to the bodily injury insurance claim; and displaying a set of insurance

codes corresponding to sorted contributing factor values; wherein each positive

contributing factor value of the sorted contributing factor values increases the value of

the estimated monetary amount for general damages for the bodily injury insurance

claim; and wherein each negative contributing factor value of the sorted contributing factor value.

Childress does teach wherein at least one of the first insurance code selection and the second insurance code selection is an injury code, wherein the contributing factor value for the injury code has a positive value (paragraph 261), the method further comprising: accessing at least one contributing factor value corresponding to a treatment code for a treatment for the bodily injury, wherein the contributing factor value corresponding to the treatment code has a negative value (paragraph 258), wherein estimating the monetary amount for general damages for the bodily injury insurance claim comprises combining the contributing factor value having a positive value corresponding to the injury code with at least the contributing factor value having a negative value corresponding to the treatment code (paragraphs 256-258), wherein the contributing factor value corresponding to the injury code results in an increase in the estimated monetary amount for general damages for the bodily injury insurance claim, wherein the contributing factor value corresponding to the treatment code results in a decrease in the estimated monetary amount for general damages for the bodily injury insurance claim (Fig. 2C, paragraphs 246, 248, 258-259); wherein the estimated monetary amount for general damages is based on the contributing factor value and at least one regional factor; wherein the estimated monetary amount for general damages is based on the contributing factor value and cost of living (paragraphs 258-259); sorting the contributing factor value corresponding to the at least one insurance code selection

with contributing factor values for one or more other insurance codes related to the
bodily injury insurance claim (paragraph 261); and displaying a set of insurance codes
corresponding to sorted contributing factor values (paragraph 261); wherein each
positive contributing factor value of the sorted contributing factor values increases the
value of the estimated monetary amount for general damages for the bodily injury
insurance claim; and wherein each negative contributing factor value of the sorted
contributing factor value (paragraphs 258 and 261). It would have been obvious to one
of ordinary skill in the art at the time of the invention to have the estimated monetary
amount for general damages based on at least contributing factors, insurance codes,
treatment codes and the cost of living for the same motivation as claim 1.

Response to Arguments

6.   Applicant's arguments with respect to claims 1-2, 4-22, 24-42, 44-55, and 100-
106 have been considered but are moot in view of the new ground(s) of rejection.

Conclusion

7.   The prior art made of record and not relied upon is considered pertinent to
applicant's disclosure.

8.   Applicant's amendment necessitated any new ground(s) of rejection presented in
this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP

§ 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37

CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE

MONTHS from the mailing date of this action. In the event a first reply is filed within

TWO MONTHS of the mailing date of this final action and the advisory action is not

mailed until after the end of the THREE-MONTH shortened statutory period, then the

shortened statutory period will expire on the date the advisory action is mailed, and any

extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of

the advisory action. In no event, however, will the statutory period for reply expire later

than SIX MONTHS from the date of this final action.

9.   Any inquiry concerning this communication or earlier communications from the

examiner should be directed to SIND PHONGSVIRAJATI whose telephone number is

(571) 270-5398. The examiner can normally be reached on Monday - Thursday 8:00-

5:00 (ET).

10.   If attempts to reach the examiner by telephone are unsuccessful, the examiner's

supervisor, Jerry O'Connor can be reached on (571) 272-6787. The fax phone number

for the organization where this application or proceeding is assigned is (571) 273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or (571) 272-1000.

/S. P./
Examiner, Art Unit 3686

29 September 2009

/Gerald J. O'Connor/
Supervisory Patent Examiner
Group Art Unit 3686